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SECRETARY OF STATE

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EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SURT	COURTYARD A.C. 2, LLC			
	(Name of Limited Liability Company)			
The er	closed Articles of Organization and fee(s) are submitted for filing.			
Please	return all correspondence concerning this matter to the following:			
	MICHAEL J. SABA, ESQ.			
	(Name of Person)			
1. **	SABA & SABA, ATTORNEYS AT LAW			
	(Firm/Company)			
43	240 S. PINEAPPLE AVE., SUITE 702			
	(Address)			
	SARASOTA, FL 34236-6724			
	(City/State and Zip Code)			
Je .				
For fu	ther information concerning this matter, please call:			
MIC	HAEL J. SABA _{at} 941 \ 365-9400			
. 1.	(Name of Person) (Area Code & Daytime Telephone Number)			
Enclo	ed is a check for the following amount:			
 \$125	00 Filing Fee \$\bigcup \\$130.00 Filing Fee & \bigcup \\$155.00 Filing Fee & \bigcup \\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)			
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -- NAME

The name of the Limited Liability Company is: COURTYARD A.C. 2, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

240 S. Pineapple Ave. Suite 702 Sarasota, FL 34236

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ARTICLE III - REGISTERED AGENT AND OFFICE

The name and the Florida street address of the registered agent is:

William A. Saba 240 S. Pineapple Ave. Suite 702 Sarasota, FL 34236

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

Registered Agent's Signature

ARTICLE IV - MANAGEMENT

The Limited Liability Company is to be managed by one or more of its members, and is therefore a member-managed company. The name and address of each Managing Member is:

MGRM:

William A. Saba

240 S. Pineapple Ave.

Suite 702

Sarasota, FL 34236

(CONTINUED)

ARTICLE V - EFFECTIVE DATE

These Articles of Organization shall be in effect as of May 8, 2008.

REQUIRED SIGNATURE:

in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts herein are true.

WILLIAM A. SABA, Managing Member

May 14, 2008